

Weighted percentages of US adults reporting limited swimming ability, 1994

Self-reported demographic characteristic	Total	95% CI	Men	95% CI	Women	95% CI
Age group						
18–24.....	22	18–27	16	10–21	30	23–37
25–34.....	25	22–27	14	11–17	35	30–39
35–44.....	28	25–32	16	13–20	40	35–45
45–54.....	35	31–40	20	15–25	51	45–58
55–64.....	50	44–55	29	23–36	68	61–75
≥65.....	68	64–72	42	36–48	86	82–90
Educational level						
<high school graduate.....	60	55–65	40	33–47	76	70–82
High school graduate.....	44	41–47	27	23–31	58	53–62
Some college.....	31	28–33	16	13–19	43	38–47
College graduate.....	22	18–26	11	8–15	36	29–42
>college graduate.....	22	18–26	14	10–19	33	26–41
Racial/ethnic identification						
White.....	32	30–34	17	15–19	45	42–48
African American.....	62	58–67	44	36–51	77	72–83
Asian.....	47	35–58	26	12–40	63	48–78
Hispanic.....	44	39–50	31	24–38	57	49–65
Total.....	37	35–38	21	19–23	51	48–53

CI = confidence interval

National Center for Injury
Prevention and Control
Centers for Disease Control
and Prevention

References

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Cultural Competence

Dr. Chin's "Viewpoint" article on culturally competent health care addresses issues in health care access and delivery that are not new

but have become more visible only recently. The Issue Brief from which Dr. Chin's article was adapted was published by the Massachusetts Health Policy Forum in May 1999. That very comprehensive and informative Issue Brief, prepared for the Forum by Dr. Chin, served as both the background and springboard for an informed discussion among public and private health policy makers who attended the Forum last May.

The Forum brings health care leaders in Massachusetts together for discussions of timely policy issues to identify where action may be brought about by public-private collaboration. We had hoped that the Forum on cultural competence would have such an impact. Indeed, the presence of federal and state health officials, community health center workers, and patient advocacy groups contributed to a productive discussion. The issues discussed included the

recruitment and training of culturally competent providers, improved data collection methodologies, and pending state legislation to provide interpreter services in hospital emergency departments.

Dr. Chin's contribution both to the Forum and to *Public Health Reports* offers an ongoing resource for information related to cultural competence and health care, while the Forum continues in its role of bringing together health policy leaders and stakeholders to address such critical issues.

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